Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Open to Public

OMB No 1545-0047

Internal Revenue Service Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection A For the 2016 calendar year, or tax year beginning and ending Check if C Name of organization D Employer identification number Address change American Legislative Exchange Council Name change Doing business as 52-0140979 Initial Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ 2900 Crystal Drive, 6th Floor 703-373-0933 termin-ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return Arlington, VA 22202 H(a) is this a group return Applica-F Name and address of principal officer Mrs. Lisa B. Nelson Yes X No for subordinates? pending same as C above H(b) Are all subordinates included? Yes I Tax-exempt status X 501(c)(3) _ 501(c) () ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list, (see instructions) J Website: ▶ www.alec.org **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > Year of formation: 1975 M State of legal domicile: IL Part I | Summary 1 Briefly describe the organization's mission or most significant activities Assist State Legislators, Activities & Governance Congress & the public by sharing research and educational info. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 23 Number of independent voting members of the governing body (Part VI, line 1b) 46 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 35 7 a Total unrelated business revenue from Part VIII, column (C), line 12 900. b Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year Current Year** 7,393,600 8,873,957. Contributions and grants (Part VIII, line 1h) Revenue Program service revenue (Part VIII, line 2g) <u>1,110,806</u>. 990,608. Investment income (Part VIII, column (A), lines[3, 4, and 7d) 2,971. 3,897. Other revenue (Part VIII, column (A), lines 5, 60, 8c, 9c, 10c, and 11e) 476.751 476,717. 11 Total revenue - add lines 8 through 11 (must equal Part VIII : column-(A) line-12 8,984,128 10,345,179. 18,500. 15,750 Grants and similar amounts paid (Part IX, column:(A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 3,393,944. 3,77<u>4,801.</u> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 83,750 16a Professional fundraising fees (Part IX, column (A), line 11e) 41,000. b Total fundraising expenses (Part IX, column (D), line 25) 514,140. 4,882,904 5,222,281. **:17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 8,376,348 9,056,582. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 607,780 49 Revenue less expenses Subtract line 18 from line 12 1,288,597. **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 5,107,279. 6,875,636. 2,239,877. 2,719,637. -21 Total liabilities (Part X, line 26) 2,867,402 Net assets or fund balances Subtract line 21 from line 20 4,155,999. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than office) is based on all information of which preparer has any knowledge. Signature of officer Date Sign 11/9/17 Mrs. Lisa B. Nelson, Here Type or print name and title Date 6/2 Print/Type preparer's name 's sinnature Paid P00916458 Thomas J. Raffa Preparer Firm's name > Raffa, P.C. 52-1511275 Firm's EIN Firm's address 1899 L Street, Use Only NW,

Phone no. 202 - 822 - 5000

X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

Washington, DC 20036

Form 990 (2016)

			Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_ - _		
•	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
-	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	ŀ		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	ļ		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12à	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	Ì		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	441		v
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	4.5	}	v
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	ļ <u></u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		v
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	_16	\vdash	X
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	x	
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 ''	-^	
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		l — —	
.5	complete Schedule G, Part III	19		х
			990	(2016)
				,/

			Yes	No
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		Ì
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u	-	
L Ua	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	23a		
b		1		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OEP.		x
00	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			•
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			.,
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1		
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	_	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	_X_	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	_X_	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1		
	If "Yes," complete Schedule R, Part V, line 2	36		_X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L_
			000	

rai	Check if Schedule O contains a response or note to any line in this Part V			
	Check it deficulte O contains a response of note to any line in this Fart v		Yes	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0	res	140
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
-	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Ť		
Ü	(gambling) winnings to prize winners?	10	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
		6		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3а		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		1	į
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	ļ	X
b	If "Yes," enter the name of the foreign country: ▶	_	1	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		ļ',	_
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	-	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a_	┼	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۱.,		
	were not tax deductible?	6b		_
7	Organizations that may receive deductible contributions under section 170(c).	-2 -2	}	x
a	·	^{r?}	 	^
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70	+	
C	to file Form 8282?	7c		x
А	If "Yes," indicate the number of Forms 8282 filed during the year	1.0	1	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f		7f		X
g	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7 <u>g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			,
	sponsoring organization have excess business holdings at any time during the year?	8	<u> </u>	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.	1		1
а	, , , , , , , , , , , , , , , , , , ,	<u>9a</u>	ļ	<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	 	<u> </u>
10	Section 501(c)(7) organizations. Enter			
а	•			
b	• •	\dashv	1	
11	Section 501(c)(12) organizations. Enter:			}
a		\dashv		
b	· · · · · · · · · · · · · · · · · · ·			
10-	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		-	
ıza b	the state of the s	120	†	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	\neg		
а	the state of the s	13a		1
u	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	The state of the s			
-	organization is licensed to issue qualified health plans			
С	5. 11			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	of "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		For	m 990	(2016)

Form 990 (2016) American Legislative Exchange Council 52-0140979 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI		_	X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 23	£,		12,
	If there are material differences in voting rights among members of the governing body, or if the governing	A COLOR	8	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		- 14	Se a
b	Enter the number of voting members included in line 1a, above, who are independent 23	* -	***	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1	Î.	36
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		\mathbf{X}^{-}
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		* *3	ه مین دین
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		!
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	J. L.	1,400	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent		9 1	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		7 °	3
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed See Schedule O for a full list of states			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	Lisa Bowen, CFO - 703-373-0933			
	2900 Crystal Drive, 6th Floor, Arlington, VA 22202			

Form	agn	(2018)	

American Legislative Exchange Council

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons.

Check this box if neither the organization in (A)	(B)			(C	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Posi heck i			one	Reportable	Reportable	Estimated
	hours per	box	, unle: cer an	ss per	rson i	s bot	han tee)	compensation	compensation	amount of
	week (list any					T	,	from	from related	other
	hours for	l diect				_		ſ	organizations (W-2/1099-MISC)	compensation from the
	related	50 92	stee			nsate		(W-2/1099-MISC)	(** 2) 1033 111100)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	adw		(** = / ********************************		and related
	below	ld tra	E L	er	Key employee	est co	i ii			organizations
	line)	를	Insti	Отпе	Key (Highest compensated employee	Form			
(1) Senator Leah Vukmir, WI	1.00									
Chair .		X		X				0.	0.	0.
(2) Senator James Buck, IN	1.00									
First Vice Chair		X		X				0.	0.	0.
(3) Senator Wayne Niederhauser, UT	1.00	}								
Second Vice Chair		X		X				0.	0.	0.
(4) Representative Gary Banz, OK	1.00									
Secretary		X		X				0.	0.	0.
(5) Representative Phil King, TX	1.00									
Immediate Past Chair		X		X				0.	. 0.	0.
(6) Senator Joel Anderson, CA	1.00									-
Director		X						0.	0.	0.
(7) Senator Bill Cadman, CO	1.00									
Director		X						0.	0.	0.
(8) Representative Alan Clemmons,	1.00									
SC; Director		X						0.	0.	0.
(9) Senator Andre Cushing, ME	1.00	}								
Director		X						0.	0.	0
(10) Representative Dave Frizzell,	1.00									
IN; Director		X						0.	0.	0.
(11) Speaker Philip Gunn, MS	1.00]								
Director		X						0.	0.	
(12) Senator Judson Hill, GA	1.00									
Director		X						0.	0.	0.
(13) Speaker William Howell, VA	1.00									
Director		X						0.	0.	0.
(14) Representative Norine Kasperik,	1.00									
WY; Director		X						0.	0.	0.
(15) Speaker Ray Merrick, KS	1.00								•	
Director		X						0.	0.	0.
(16) Representative Dawn Pettengill,	1.00									
IA; Director •		X			<u></u>		L.	0.	0.	0.
(17) Representative John Piscopo, CT	1.00]								
Director		x						0,	0.	0.
632007 11-11-16						_				Form 990 (2016

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

American Legislative Exchange Council Form 990 52-0140979 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (F) (C) (D) (E) Name and title Average Position Reportable Estimated Reportable (check all that apply) hours compensation compensation amount of per from from related other week the organizations compensation individual trustee or director (list any (W·2/1099·MISC) organization from the hours for (W-2/1099-MISC) organization Highest compensated Institutional trustee related and related Кеу етріоуее organizations organizations below line) 40.00 (27) Wilhelm Meierling X 169,709. 0. 7,627. <u>COO</u> 40.00 (28) Jonathan Williams X 156,909. 0. 18,403. Chief Economist 40.00 (29) Jeff Lambert X 148,934. 0. 24,159. VP - Member Relations 40.00 (30) Bartlett Cleland 0. 3,192. 128,509. General Counsel 40.00 (31) Bob Williams X 0. Senior Fellow 129,354. 576. 40.00 (32) Marie Vulaj 105,003. 0. 13,894. Sr. Dir.-Corp. & Nonprofit Relations Total to Part VII, Section A, line 1c 838,418. 67,851.

		Check if Schedule O cont		or note to any lir	ne in this Part VIII			[]
1				or rioto to arry in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c	Federated campaigns Membership dues Fundraising events Related organizations	1a 1b 1c 1d				`	***
Sontributions, and Other Sin	f g	similar amounts not included abo Noncash contributions included in lines	ts, and ve 1f	8,873,957.	8,873,957.			, , , , , , , , , , , , , , , , , , ,
"	11	Total. Add lines 1a-1f		Business Cada	0,073,937 .	<u> </u>	%. c	*
_		Conferences/seminars		Business Code 900099	912,682.	911,782.	900.	
Š	2 a			900099		·	300.	
ie g	b	- 11 1 1		900099	74,609.	74,609.		
E a	C	-		900099	3,317.	3,317.	-	
ga Re	0							
Program Service Revenue	e	All other program con use way						
_	1	All other program service reve Total. Add lines 2a-2f	enue		990,608.			*
\dashv	3	Investment income (including	duudonda intor		330,000.			Ma or it is
	3	other similar amounts)	dividerids, inter	est, and	3,897.			3,897.
ļ	4	•	v avamnt hand	proceeds	3,057.	-		3,037.
	4	Income from investment of ta	x-exempt bond	proceeds				
i	5	Royalties	() D = -1	(A) Davis and	,	**	#35°46 \ 27654 \	\$
	•	0	(i) Real	(II) Personal	* **	ra ostania	1	11 8 1 W
		Gross rents		<u> </u>			-525	, *
		Less. rental expenses				,		
- 1		Rental income or (loss)	<u> </u>	<u> </u>		X 44		1
		Net rental income or (loss)		<u> </u>		, , , , , , , , , , , , , , , , , , ,		ļ
	7 a	Gross amount from sales of	(ı) Securities	(II) Other	1 2	,	* * * > >	
		assets other than inventory			* '			, .
	b	Less: cost or other basis			v	N		4 5 /
		and sales expenses		<u> </u>				* *
	C	Gain or (loss)		1				~~
	C	Net gain or (loss)						
Other Revenue	8 a	Gross income from fundraisin including \$	of			, , ,	`	
æ		contributions reported on line	e 1c). See					
ĕ		Part IV, line 18	а					
₹		Less. direct expenses	. b	` <u></u>				
		Net income or (loss) from fund	-					· · · · · · · · · · · · · · · · · · ·
	9 a	Gross income from gaming ac						
ŀ		Part IV, line 19	а					
		Less: direct expenses	b	`				~~ ~ - ~ - ~ - ~ - ~ - ~ - ~ - ~ - ~ -
		Net income or (loss) from gan	•			<u> </u>		
	10 a	Gross sales of inventory, less				-		
		and allowances	а					
		Less: cost of goods sold	b	· L		-	-	
}		Net income or (loss) from sale		<u> </u>				
ŀ		Miscellaneous Revenu	ie	Business Code			-	
		Sublease income **		900099	476,717.	476,717.		
	t							
	C							
ļ	C			L	: - : -			
1		Total. Add lines 11a-11d			476,717.			
	12	Total revenue. See instructions.		<u> </u>	10,345,179.	1,466,425.	900.	3,897.

Secti	on 501(c)(3) and 501(c)(4) organizations must com			mplete column (A).	
	Check if Schedule O contains a respon		this Part IX (B)	(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	j	j		
	and domestic governments. See Part IV, line 21	18,500.	18,500.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	957,889	677,500.	251,381.	29,008.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,298,974.	1,949,535.	178,122.	171,317.
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	56,201.	45,561.	7,126.	3,514.
9	Other employee benefits	251,919.	217,461.	15,377.	19,081.
10	Payroll taxes	209,818.	170,095.	26,603.	13,120.
11	Fees for services (non-employees).	203,010.	2707033.	20,0031	
	Management				
b	Legal	69,517.	57,396.	8,115.	4,006.
_	Accounting	53,936.	43,818.	6,774.	3,344.
	Lobbying	33,330.	45,010.	0,7720	<u> </u>
	Professional fundraising services. See Part IV, line 17	41,000.			41,000.
e f	Investment management fees	41,000.			41,000.
			·		
g	column (A) amount, list line 11g expenses on Sch O.)	175,989.	144,825.	31,164.	
40		41,595.	41,595.	31,104.	
12	Advertising and promotion	516,704.	349,289.	31,490.	135,925.
13	Office expenses	156,429.	127,871.	19,120.	9,438.
14	Information technology	130,423.	12/,0/1.	19,120.	9,430
15	Royalties	1,039,754.	844,696.	130,593.	64,465.
16	Occupancy	229,121.	225,468.	3,515.	
17	Travel	229,121.	225,400.	3,313.	138.
18	Payments of travel or entertainment expenses	212 054	248,605.	64 440	
40	for any federal, state, or local public officials	313,054.		64,449. 72,498.	111
19	Conferences, conventions, and meetings	1,566,786.	1,494,177. 3,175.	491.	111.
20	Interest	3,908.	3,1/3.	491.	242.
21	Payments to affiliates	216 704	176,116.	27 220	
22	Depreciation, depletion, and amortization	216,784.	33,348.	<u>27,228.</u> 4,395.	13,440. 2,170.
23	Insurance	39,913.	33,348.	4,373.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Subscriptions/research	359,914.	355,898.	471.	3,545.
	Bad debt	280,221.		280,221.	
c	D	129,048.	122,941.	6,076.	31.
	Artwork & graphics	12,049.	12,049.		
	All other expenses	17,559.	13,766.	3,548.	245.
25	Total functional expenses. Add lines 1 through 24e	9,056,582.	7,373,685.	1,168,757.	514,140
26	Joint costs. Complete this line only if the organization	-,,			
	reported in column (B) joint costs from a combined		ĺ		
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	I tollowing 507 80-2 (A50 856-720)				Far- 000 (0040)

Pan		Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,083,635.	1	635,557.
	2	Savings and temporary cash investments	1,374,813.	2	3,910,114.
	3	Pledges and grants receivable, net	1,202,517.	3	747,645.
	4	Accounts receivable, net	32,488.	4	97,642.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
1		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			,
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ខ្ម		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use		8	
İ	9	Prepaid expenses and deferred charges	193,640.	9	261,523
	10a	Land, buildings, and equipment: cost or other		ı	
		basis. Complete Part VI of Schedule D 10a 1,977,180.			
Ì	b	Less: accumulated depreciation 10b 990,325.	870,802.	10c	986,855
1	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11	117,000.	12	111,302
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	232,384.	15	124,998
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,107,279.	16	6,875,636
	17	Accounts payable and accrued expenses	562,989.	17	1,028,450
	18	Grants payable		18	
ŀ	19	Deferred revenue	242,505.	19	366,353
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ဖွ	22	Loans and other payables to current and former officers, directors, trustees,			
<u> </u>		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		1	
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	1,434,383.		1,324,834
_	26	Total liabilities. Add lines 17 through 25	<u>2,239,877.</u>	26	2,719,637
		Organizations that follow SFAS 117 (ASC 958), check here ▶			
es		complete lines 27 through 29, and lines 33 and 34.		ŀ	
anc	27	Unrestricted net assets	632,440.		1,283,848
Ř	28	Temporarily restricted net assets	<u>2,234,962.</u>	28	2,872,151
פ	29	Permanently restricted net assets		29	
Ī		Organizations that do not follow SFAS 117 (ASC 958), check here			
ō		and complete lines 30 through 34.	,		•
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
AS:	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
<u> </u>	32	Retained earnings, endowment, accumulated income, or other funds		32	
۱ ۲	33	Total net assets or fund balances	2,867,402.		4,155,999.
	34	Total liabilities and net assets/fund balances	5,107,279.	34	6,875,636. Form 990 (2016

Form	1990 (2016) American Legislative Exchange Council	<u> 52-0</u>	<u> </u>	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets	•			
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,345		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,05		
3	Revenue less expenses Subtract line 2 from line 1	3	1,288		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,86	7 <u>,4</u>	<u>02.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	4,15	<u>5,9</u>	<u>99.</u>
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			•	Щ.
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	rt		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ııred aud	nt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2016)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number Name of the organization 52-0140979 American Legislative Exchange Council Reason for Public Charity Status (All organizations must complete this part) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college q or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. ____ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed in your governing document? (vi) Amount of other (III) Type of organization (v) Amount of monetary (i) Name of supported (ii) EIN (described on lines 1-10 support (see instructions) support (see instructions) organization No Yes above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 American Legislative Exchange Council 52-0140979 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 7216208. 5825882. 6231036. 7393600. 8873957.35540683. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 7216208. 5825882. 6231036. 7393600. 8873957.35540683. 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 1189246. 34351437. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (b) 2013 (e) 2016 Calendar year (or fiscal year beginning in) (a) 2012 (c) 2014 (d) 2015 (f) Total 7216208. 5825882. 6231036 7393600. 8873957.35540683. 7 Amounts from line 4 Gross income from interest. dividends, payments received on securities loans, rents, royalties 4,264. 2,226. 2,528 2,971. 3,897 15,886. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital 318,086. 476,751 476,751 476,717. 4,098. 1752403. assets (Explain in Part VI) 37308972. 11 Total support. Add lines 7 through 10 5,562,691. 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 92.07 14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 14 % 15 15 Public support percentage from 2015 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 American Legislative Exchange Council 52-0140979 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Coot	qualify under the tests listed b	elow, please comp	olete Part II)				
	ion A. Public Support				[
	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and						
	nembership fees received (Do not						
11	nclude any "unusual grants.")						
n fe a	Gross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
а	Gross receipts from activities that are not an unrelated trade or bus- ness under section 513						
12	Tax revenues levied for the organ- zation's benefit and either paid to or expended on its behalf						
	'						
	The value of services or facilities						
	urnished by a governmental unit to he organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	B received from disqualified persons			ļ			
b A fi	Amounts included on lines 2 and 3 received rom other than disqualified persons that exceed the greater of \$5,000 or 1% of the grount on line 13 for the year						
	Add lines 7a and 7b			_	· · · · · · · · · · · · · · · · · · ·		
	Public support. (Subtract line 7c from line 6)	-, -,					
	tion B. Total Support		·	1		·!··	
Calend	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6	•					
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ъl	Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c/	Add lines 10a and 10b						-
11 1	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12)	L	<u> </u>		<u> </u>		
	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ation,
	check this box and stop here	i- 0					▶
	tion C. Computation of Publ					., 	
	Public support percentage for 2016 (· ·	column (f))		15	
	Public support percentage from 2015			·		16	
	tion D. Computation of Inve						
	Investment income percentage for 20	•	* * * * * * * * * * * * * * * * * * * *	ne 13, column (f))		17	
	Investment income percentage from					18	
ı	33 1/3% support tests - 2016. If the more than 33 1/3%, check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organi	zation	▶□
	33 1/3% support tests - 2015. If the	=					
	line 18 is not more than 33 1/3%, che		• -			_	P =

Schedule A (Form 990 or 990 EZ) 2016 American Legislative Exchange Council

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizatio

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		=
ļ	2		
	`3a_		
	3b		
	3c		
	4a	-	
	4b		
	4c		
		_	સ
	- 5a		,
	5b 5c		
	6		
	7		
	8		
	9a_		
	9b		
	9c		
	10a		
	10b		1

	dule A (Form 990 or 990 EZ) 2016 American Legislative Exchange Council 52-01	<u> 4097</u>	9 Pa	ige 5
Par	rt IV Supporting Organizations (continued)		T	
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
•	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Soc	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
360	tion of Type in Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		,	
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	•		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	 	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
500	supported organizations played in this regard. stion E. Type III Functionally Integrated Supporting Organizations	3	<u> </u>	
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Instructions).			
1 a	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			•
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	structions	s)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify	Ì		
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined		ŀ	
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		1	
	activities but for the organization's involvement.	2b	↓	L
3	Parent of Supported Organizations Answer (a) and (b) below.	1		
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a	 	
Ь				
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard	l 3b	1	i

	dule A (Form 990 or 990 EZ) 2016 American Legislative Ex			52-0140979 Page 6
Pa	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	n Part VI) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	<u> </u>	
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year).			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2		2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions)	_ 6		
7	Check here if the current year is the organization's first as a non-functional	lly integra	ted Type III supporting o	rganization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2016

	ty T			2-01409/9 Page/
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nızatıons (continued)	
<u>Secti</u>	on D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			<u> </u>
5_	Qualified set-aside amounts (prior IRS approval required)			··· ·
6	Other distributions (describe in Part VI). See instructions	···-		
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	•	
	(provide details in Part VI) See instructions			· · · · · · · · · · · · · · · · · · ·
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) _. Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016			
а	-			
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D,			
	line 7: \$, ,
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
	Remaining underdistributions for years prior to 2016, if			
	any Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3			
-	and 4c			
8	Breakdown of line 7	,		
a		 		
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990 EZ) 2016 American Legislative Exchange Council 52-0140979 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information (See instructions)
Schedule A, Part II, Line 10, Explanation for Other Income:
Miscellaneous
2012 Amount: \$ 4,098.
2013 Amount: \$ 252.
Sublease income
2013 Amount: \$ 317,834.
2014 Amount: \$ 476,751.
2015 Amount: \$ 476,751.
2016 Amount: \$ 476,717.

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

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If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•					
	501(c)(4), (5), or (6) organizat	ions Complete Part III		· 1 -	
Name of orga					oyer identification number
David A	America	<u>n Legislative Exc</u>	hange Counc	:il	52-0140979
Part I-A	Complete if the org	anization is exempt unde	er section 501(c)	or is a section 527 o	rganization.
1 Provide	a description of the organiz	ation's direct and indirect politica	l campaign activities in	Part IV.	
2 Political	campaign activity expendit	ures		▶ \$	
3 Volunte	er hours for political campai	gn activities		••	
Part I-B	Complete if the org	janization is exempt unde	er section 501(c)(3)	
		incurred by the organization under		<u>>,.</u>	
	<u>-</u>	incurred by organization manager		▶ \$	
	•	n 4955 tax, did it file Form 4720 fo			Yes No
	correction made?				Yes No
	" describe in Part IV				
Part I-C		janization is exempt unde	er section 501(c),	except section 501	(c)(3).
1 Enter th	e amount directly expended	by the filing organization for sect	tion 527 exempt functi	on activities >\$	
2 Enter th	e amount of the filing organ	ization's funds contributed to other	er organizations for se	ction 527	
exempt	function activities			▶ \$	
3 Total ex	empt function expenditures	Add lines 1 and 2 Enter here an	don Form 1120-POL,		
line 17t)			▶ \$	
4 Did the	filing organization file Form	1120-POL for this year?			Yes No
5 Enter th	ne names, addresses and en	nployer identification number (EIN	l) of all section 527 pol	itical organizations to which	ch the filing organization
made p	ayments. For each organiza	tion listed, enter the amount paid	from the filing organization	ation's funds Also enter th	ne amount of political
contribi	utions received that were pr	omptly and directly delivered to a	separate political orga	inization, such as a separa	ite segregated fund or a
politica	action committee (PAC) If	additional space is needed, provide	de information in Part I	V.	,
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and promptly and directly
				funds If none, enter -0-	delivered to a separate
	•				political organization
					If none, enter -0-
	· · · · · · · · · · · · · · · · · · ·				
					
			 	-	 -
			-		
	4				
			1	1	<u> </u>

Part II-A Complete if the organization 501(h)).	Amerio anizatio	can Lec n is exen	rislative Experience Experience Experience Experience Experience Experience Experience Experience Experience Ex	xchange Cou n 501(c)(3) and fil	<u>ncil 52-0</u> ed Form 5768 (ele	140979 Page 2 ection under
	on belone	e to an affili	ated group (and list in	Part IV each affiliated	group member's name	e, address, EIN.
expenses, and share			•	r art iv cach annated	group member e nam	o, addi 000, 2,
. — ' '		, ,	d "limited control" pro	visions anniv		
Limit	s on Lobb	ying Expen		vocate apply	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence nubl	ic opinion (a	rass roots Johhving)			
b Total lobbying expenditures to influ						
c Total lobbying expenditures (add lin			y (direct lobbying)			
d Other exempt purpose expenditure		. 10,			9,015,582.	
e Total exempt purpose expenditures		e 1c and 1d			9,015,582.	
. , , , ,	•			columne	600,779.	
f Lobbying nontaxable amount. Ente					000,113.	
If the amount on line 1e, column (a) or	(D) IS:		ying nontaxable amo	ount is:		
Not over \$500,000			he amount on line 1e.			
Over \$500,000 but not over \$1,000			O plus 15% of the exce			
Over \$1,000,000 but not over \$1,50			O plus 10% of the exce			,
Over \$1,500,000 but not over \$17,0	000,000		O plus 5% of the exces	ss over \$1,500,000		
Over \$17,000,000		\$1,000,0	00			,
						· v
g Grassroots nontaxable amount (en	150,195.					
h Subtract line 1g from line 1a If zero	or less, e	nter -0-			0.	
i Subtract line 1f from line 1c If zero	or less, e	nter -0-			0.	
j If there is an amount other than zer	o on eithe	r line 1h or l	ine 1i, did the organiza	ition file Form 4720	,	
reporting section 4911 tax for this	/ear?					Yes No
(Some organizations th	See	a section 50 the separa	te instructions for lin	have to complete all les 2a through 2f.)	of the five columns b	elow.
	Lobb	ying Expen	ditures During 4-Yea	r Averaging Period	· · · ·	-
Calendar year (or fiscal year beginning in)	(a) :	2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	56	7,760.	531,893.	564,630.	600,779.	2,265,062.
b Lobbying ceiling amount						
(150% of line 2a, column(e))						3,397,593.
c Total lobbying expenditures						
	1 4	1 040	122 072	141,158.	150,195.	566,266.
d Grassroots nontaxable amount	14	1,940.	132,973.	T#T'T20.	150,135.	500,400.
e Grassroots ceiling amount						940 200
(150% of line 2d, column (e))						849,399.
f Grassroots lobbying expenditures						

Schedule C (Foim 990 or 990-EZ) 2016 American Legislative Exchange Council 52-0140979 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For ea	r each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description			(b)	
	lobbying activity	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of	1	^		
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	ļ			
C	Media advertisements?	<u> </u>			
d	Mailings to members, legislators, or the public?	ļ			
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i		•		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		·		
b	If "Yes," enter the amount of any tax incurred under section 4912		,		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1			
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
	Did the organization agree to carry over lobbying and political campaign activity expenditures from t	he prior year	Э 3		
Pan	SIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				e 3, is
1	Dues, assessments and similar amounts from members		1		
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical		1	
	expenses for which the section 527(f) tax was paid).				
	Current year		2a		
	Carryover from last year		2b		
	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4		
5 Par	Taxable amount of lobbying and political expenditures (see instructions) LIV Supplemental Information		5		
		in liet). Doct II	Λ limas 1		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated grou	ip list), Part II-	A, imes i	anu 2 (566	
ınstru	ctions), and Part II-B, line 1 Also, complete this part for any additional information				
					
					

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
➤ Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

2016
Open to Public Inspection

Name of the organization Employer identification number 52-0140979 American Legislative Exchange Council Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b 2¢ c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

		<u>n Legislat</u>							<u>40979</u>	
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tre	asures,	or Othe	er Simil	<u>ar Asse</u>	ts (continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	k any of the f	ollowing tha	at are a si	gnıfıcant	use of its	collection i	tems
	(check all that apply)									
а	Public exhibition	d		Loan or exch	ange progr	ams				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how t	hey further th	e organızat	ion's exei	mpt purp	ose in Pari	t XIII.	
5	During the year, did the organization solicit of	r receive donations (of art, h	istorical treas	ures, or oth	ner sımılar	assets	_	_	
	to be sold to raise funds rather than to be m								Yes	No_
Par	t IV Escrow and Custodial Arran		ete if th	e organizatior	answered	"Yes" on	Form 99	0, Part IV,	lıne 9, or	
	reported an amount on Form 990, Pa					-				
1a	Is the organization an agent, trustee, custod	an or other intermed	lary for	contributions	or other a	ssets not	ıncluded	_	_	
	on Form 990, Part X?								」 Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table [.]						
									Amount	
	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year						1e			
	Ending balance						_1f	L		
	Did the organization include an amount on F							L	Yes	∐ No
	If "Yes," explain the arrangement in Part XIII.							-		<u> </u>
Par	t V Endowment Funds. Complete									
	_	(a) Current year	(b) I	Prior year	(c) Two year	irs back	(d) Three	years back	(e) Four y	ears back
	Beginning of year balance					-				
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
_	and programs									
	Administrative expenses									
g	End of year balance		L	4					<u> </u>	
2	Provide the estimated percentage of the cur	rent year end baland	,	rg, column (a	neid as:					
a	Board designated or quasi-endowment		%							
	Permanent endowment	% %								
С	Temporarily restricted endowment									
2-	The percentages on lines 2a, 2b, and 2c sho	•	ation th	at are hold a	ad administ	arad far t	ho organi	zation		
Эa	Are there endowment funds not in the posse by:	ession of the organiz	auonu	iat are riciu ai	iu auminist	erea for t	ne organi	Zation	T.	res No
	(i) unrelated organizations								3a(i)	es 110
	(ii) related organizations								3a(ii)	
h	If "Yes" on line 3a(ii), are the related organizations	atione lietad ae raqui	red on	Schadula R2					3b	$\overline{}$
4	Describe in Part XIII the intended uses of the	<u>-</u>							_ 30	
	t VI Land, Buildings, and Equipn		J	Turius.						
L	Complete if the organization answere		0. Part	IV. line 11a S	ee Form 99	0. Part X.	line 10.			
	Description of property	(a) Cost or o		(b) Cost		7	ccumulat	ed	(d) Book	value
	becomplied of property	basis (investr		basis (1 11	preciation	1	,=, ===	
12	Land	,		<u> </u>	· · · · ·		· · · · · · · · · · · · · · · · · · ·			
	Buildings			1		1				
	Leasehold improvements			1.29	4,834.		593,2	28.	701	,606.
	Equipment				0,079.		326,3			,748.
	Other	-			2,267.		70,7			,501.
	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colu			,		. •		,855.

<u>1</u>	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Capital lease obligations	8,021.
(3)	Deferred rent and lease benefit	1,271,827.
(4)	Subtenant security deposit	44,986.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 1,324,834.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

	edule D (Form 990) 2016 American Legislative Exc rt XI Reconciliation of Revenue per Audited Financial State				0140979 Page 4
	Complete if the organization answered "Yes" on Form 990, Part IV, line		revenue per n	Cluii	••
_		124.	·	1	10,363,770.
1	Total revenue, gains, and other support per audited financial statements			- '	10,303,170.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	ا ده ا			
a	·	2a	18,591.		
b		2b	10,391.	}	
C	Recovenes of prior year grants	2c			
d	,	2d			10 501
е				2e	18,591.
3	Subtract line 2e from line 1			3	10,345,179.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	_4b			
С				4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	La SACIL	-	5	10,345,179.
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta		Expenses per	Ketu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			0.055.450
1	Total expenses and losses per audited financial statements			1	9,075,173.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 1	40 -04		
а	Donated services and use of facilities	2a	<u> 18,591.</u>	ŀ	
b	Prior year adjustments	2b			•
C	Other losses	2c			
d	Other (Describe in Part XIII)	2d		,	
е	Add lines 2a through 2d			2e	18,591.
3	Subtract line 2e from line 1			3	9,056,582.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	, ,			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b		0 - 0	
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	9,056,582.
Pa	rt XIII Supplemental Information.				
	ride the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any			4; Part	: X, line 2; Part XI,
	rt X, Line 2:				
<u>Ma</u>	nagement reviews and assesses all activi	<u>ties annu</u>	<u>ally to i</u>	<u>den</u>	tify any
<u>ch</u>	anges in the scope of the activities and	l revenue	sources a	nd	the tax
tr	eatment thereof to identify any uncertain	.nty in ir	come tax.	F	or the year
en	ded December 31, 2016, management did no	ot identif	y any uno	ert	ainty in
<u>in</u>	come tax requiring recognition or disclo	sure in t	he financ	ial	
<u>st</u>	atements.				
					·
			·		
		· 			

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization						Employer ide	ntification number
America	n Legislative Excl	nang	e C	ouncil		52-0140	979
Part I Fundraising Activities required to complete this pa	Complete if the organization answrt.	ered "Y	es" oı	n Form 990, Part IV,	line 1	7. Form 990-EZ	filers are not
1 Indicate whether the organization rai a X Mail solicitations b X Internet and email solicitation c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the	e Solicità f Solicità g Specia or oral agreement with any individua Part VII) or entity in connection with a sixiduals or entities (fundraisers) purs	ation of ation of I fundra al (inclui profess	non-g gover ising ting o onal f	overnment grants nment grants events fficers, directors, true fundraising services?	stees	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? (iv) Gross receipts from activity,		(iv) Gross receipts from activity,		Amount paid or retained by) fundraiser ted in col (i)	(vi) Amount paid to (or retained by) organization
MA Patterson, LLC - 4740	Solicits funds on behalf	Yes	No				
Clark Lane, Plainfield, IN	of ALEC's annual conf.		x	1,195,300.		33,000.	1,162,300.
Axiom - 8460 G Tyco Road, Vienna, VA 22182	Solicits funds on behalf of ALEC's annual conf.		х	110,000.		8,000.	102,000.
						•	
			-				
Total 3 List all states in which the organizati or licensing.	on is registered or licensed to solicit	contrib	▶	1,305,300, s or has been notified	d it is	41,000. exempt from re	1,264,300, egistration
AK, AL, AR, AZ, CA, CO, CT, OH, OK, OR, PA, RI, SC, TN,		, MA ,	MD,	ME,MI,MN,M	S,1	NC, ND, NH	,NJ,NM,NY
				•			

2 Less 3 Gros 4 Cash 5 None 6 Rent 7 Food 8 Ente 9 Othe 10 Direct 11 Net Part III Part III 1 Gros 2 Cash 3 Non 4 Ren	oss receipts ss: Contributions oss income (line 1 minus line 2) sh prizes oncash prizes ont/facility costs od and beverages tertainment her direct expenses	(event type)	(event type)	(total number)	(d) Total events (add col (a) through col (c))
2 Less 3 Gros 4 Cash 5 None 6 Rent 7 Food 8 Ente 9 Othe 10 Direct 11 Net Part III Part III Gross 2 Cash 3 None 4 Rent	ess: Contributions coss income (line 1 minus line 2) esh prizes encash prizes ent/facility costs od and beverages tertainment	(event type)		(total number)	col (c))
2 Less 3 Gros 4 Cash 5 None 6 Rent 7 Food 8 Ente 9 Othe 10 Direct 11 Net Part III Part III Gross 2 Cash 3 None 4 Rent	ess: Contributions coss income (line 1 minus line 2) esh prizes encash prizes ent/facility costs od and beverages tertainment		,		
2 Less 3 Gros 4 Cash 5 None 6 Rent 7 Food 8 Ente 9 Othe 10 Direct 11 Net Part III Part III Gross 2 Cash 3 None 4 Rent	ess: Contributions coss income (line 1 minus line 2) esh prizes encash prizes ent/facility costs od and beverages tertainment		,		
3 Gross 4 Cash 5 None 6 Rent 7 Food 8 Ente 9 Othe 10 Direct 11 Net Part III Part III Gross 2 Cash 3 None 4 Rent	oss income (line 1 minus line 2) ish prizes incash prizes int/facility costs od and beverages tertainment		,		
4 Cash 5 None 6 Rent 7 Food 8 Ente 9 Othe 10 Direct 11 Net Part III Part III Gross 2 Cash 3 None 4 Rent	sh prizes pricash prizes prit/facility costs od and beverages tertainment		,		
4 Cash 5 None 6 Rent 7 Food 8 Ente 9 Othe 10 Direct 11 Net Part III Part III Gross 2 Cash 3 None 4 Rent	sh prizes pricash prizes prit/facility costs od and beverages tertainment		,		
5 None 8 Ente 9 Othe 10 Direct 11 Net Part III 1 Gross 2 Casi 3 Non 4 Ren	encash prizes ent/facility costs od and beverages tertainment		,		
Sesued 6 Rent 7 Food 8 Ente 9 Other 10 Direct 11 Net 11 Gross 2 Cast 3 Non 4 Rent 10 R	ont/facility costs od and beverages tertainment		,		
8 Ente 9 Othe 10 Direct 11 Net Part III 1 Gross 2 Cass 3 Non 4 Ren	od and beverages tertainment		,		
8 Ente 9 Othe 10 Direct 11 Net Part III 1 Gross 2 Cass 3 Non 4 Ren	od and beverages tertainment		,		
8 Ente 9 Othe 10 Direct 11 Net Part III 1 Gross 2 Cass 3 Non 4 Ren	tertainment		,		
8 Ente 9 Othe 10 Direct 11 Net Part III onumber 1 Gross 2 Cass 3 Non 4 Ren					
9 Other 10 Direct 11 Net Part III 9 9 Other 11 Net Part III 9 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
Part III Gross 1 Gross 2 Cass 3 Non 4 Ren	nor allout expended				
Part III enuevea 1 Gros 2 Cast 3 Non 4 Ren	rect expense summary. Add lines 4 throug	h 9 ın column (d)		•	
Direct Expenses 2 Cast 3 Non 4 Ren	et income summary Subtract line 10 from	line 3, column (d)	000 D + N/ 1 - + 40	<u> </u>	
Direct Expenses 2 Casi 3 Non 4 Ren	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a	answered "Yes" on Fo	rm 990, Part IV, line 19, or l	reported more than	
2 Casi	\$10,000 011 0111 000 EE, 1110 0a	4-) Dinne	(b) Pull tabs/instant	(a) Other geming	(d) Total gaming (add
2 Casi		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c)
2 Cast 3 Non 4 Ren	oss revenue				
Orect Expense 3 Non	OSS 16 Venue				
	ash prizes				
	oncash prizes				
5 Othe	ent/facility costs				
	her direct expenses				•
C Valu	shuntaar lahar		%	Yes %	;
6 Volu	olunteer labor	No No	No	Land NO	
7 Dire	rect expense summary Add lines 2 throug	jh 5 in column (d)		>	
8 Net	,	7 from line 1, column (c	(t	>	
	et gaming income summary. Subtract line_				
	et gaming income summary. Subtract line				Yes No
	the state(s) in which the organization cond		se states?		1es110
	the state(s) in which the organization condo				
	the state(s) in which the organization cond				
10a Were ar b If "Yes,"	the state(s) in which the organization condorganization licensed to conduct gaming a "explain.				Yes No

Sch	edule G (Form 990 or 990-EZ) 2016 American Legislative Exchange Council 52-0140979 Page 3
	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed
	to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility . 13a %
b	An outside facility 13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name
	Address >
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount
	of gaming revenue retained by the third party > \$
C	If "Yes," enter name and address of the third party
	Name
	Address >
16	Gaming manager information
	Name
	Gaming manager compensation > \$
	Description of services provided
	Director/officer Employee Independent contractor
4-	Mandatas, distributoras,
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
L	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
Pa	organization's own exempt activities during the tax year \$\ \text{rt IV} \ \ \text{Supplemental Information.} Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions
_	
SC	hedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers:
<u>(i</u>) Name of Fundraiser: MA Patterson, LLC
(i) Address of Europeaison, 4740 Clark Land Disinfield IN 46169
7+) Address of Fundraiser: 4740 Clark Lane, Plainfield, IN 46168
_	

Schedule G	(Form 990 or 990 EZ) Supplemental Info	American	Legislative	Exchange	Council	52-0140979 Page 4
Part IV	Supplemental Info	rmation (continue	ed)	····		
						
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SCHEDULE'J (Form-990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

American Legislative Exchange Council

Employer identification number 52-0140979

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as, maid, chauffeur, chef)		•	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	-		
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		v	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee X Written employment contract Independent compensation consultant X Compensation survey or study X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	4a		_X_
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		_X_
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of.			
	The organization?	5a	X	
b	Any related organization?	5b		<u>X</u>
6	If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
		6a		X
b	Any related organization?	6b_		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7			,,	
_	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
ċ	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	_8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

52-0140979

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2016

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) - Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2	N-2 and/or 1099-MI	and/or 1099-MISC compensation	(C) Retirement and	ple	(E) Total of columns	(F) Compensation
(A) Name and Title	<u></u>	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)·(i)(B)	in column (B) reported as deferred on prior Form 990
(1) Lisa Nelson	Ξ	310,208.	82,000.	0	10,000.	632.	402,840.	0
	(ii)		0.	0.	0	0		0
Lisa Bowen	(i)	147,209.	10,000.	0.	6,280.	18,229.	181,718.	0
CFO CFO	(ii)	0	0.	0.	• 0	0	1	0
(3) Michael Bowman] (i)	158,937.	12,000.	0.	6,829.	18,229.	195,995.	0
	(ii)	0	0.	0.	• 0	0		0
Wilhelm Meierling] (i)	157,709.	12,000.	0.	6,780.	847.	177,336.	0
000	(ii)	0.		0.	0	0.	0.	0.
Jonathan Williams	(i)	144,409.	12,500.	0.	6,268.	12,135.	175,312.	0
Chief Economist (i	(ii)	0.	0.	0.	0.	0		0
rt] (i)	136,934.	12,000.	0.	5,930.	18,229.	173,093.	0
VP - Member Relations (i	(ii)	0.	0.	0.	0	0	0	0
	ε							
3	(1)							
	Ξ							
i)	(1)							
<u> </u>	Ξ							
)	⊞							•
	(:)							
	(1)							
	Ξ							
J)	⊞							
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Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Nome of the surrent

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Schedule O (Form 990 or 990-EZ) (2016)

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

American Legislative Exchange Council	52-0140979
Form 990, Part III, Line 4d, Other Program Services:	
State Outreach	
Expenses \$ 668,275. including grants of \$ 0. Revenue	\$ 0.
Membership	
Expenses \$ 485,190. including grants of \$ 18,500. Rev	renue \$ 110,546.
Form 990, Part VI, Section A, line 6:	
In accordance with the bylaws of ALEC, full membership sh	nall be open to
persons dedicated to the preservation of individual liber	ty, basic American
values and institutions, productive free enterprise, and	limited
representative government, who support the purposes of AI	LEC, and who serve,
or formerly served, as members of a state or territorial	legislature, the
United States Congress or similar bodies outside the Unit	ed States.
Form 990, Part VI, Section A, line 7a:	
Directors are elected each December. The Board shall con	nsist of 23 members
of which 18 directors are nominated and elected by the Bo	pard of Directors.
Three Directors shall be nominated by the Board of Direct	cors from a list of
six nominees supplied by the State Chair, one of whom sha	all be the Chair of
the State Chairs. Two Directors shall be elected by the	Board of Directors
from a list of four nominees supplied by the Task Force	chairs, all four of
whom shall be Task Force public sector chairs.	
Form 990, Part VI, Section A, line 8b:	

ALEC does not maintain minutes for all committees, but decisions are taken

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990: AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY

is obtained.

Name of the organization	Employer identification number
American Legislative Exchange Council	52-0140979
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV	
Form 990, Part VI, Section C, Line 19:	
ALEC makes these documents available upon request.	n

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

Open to Public Inspection 2016

OMB No 1545-0047 .

Information about Schedule R (Form 990) and its instructions is at www.lrs.gov/form990.

Employer identification number 52-0140979 American Legislative Exchange Council Name of the organization Department of the Treasury Internal Revenue Service

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

Part

			-				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	· · · ·	(f) Direct controlling entity	
							,
Part II Identification of Related Tax-Exempt Organizations. Complete organizations during the tax year	ations. Complete if the organization a	if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt	, Part IV, line 34 be	cause it had one c	r more related tax-exer	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	12(b)(13)
Jeffersonian Project - 46-2233126	Educate the public & gov't			((2)(2), 22		Yes	2
2900 Crystal Drive, 6th Floor Arlington, VA 22202	policy makers by providing nonpartisan research	District of Columbia 501(c)(4)	501(c)(4)			×	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2016

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Schedule R (Form 990) 2016 American Legislative Exchange Council

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Part III

organizations treated as a partnership during the tax year.	tnership during the ta	x year.										}
(e)	(q)	(0)	(Q)		(e)	Θ	(a)	•	ε	()	9	<u>.</u>
Name, address, and EiN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predomin (related, excluded fro sections	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		General or Percentage managing ownership partner? Yes No
					, ,,, ,							
							_					
						,						
Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or frust during the tax year.	janizations Taxable a poration or trust durin	ss a Corportion of the tax	oration or Trust. Co year.	omplete if th	ne organizatior	n answered "Ye	s" on Form 9	90, Part IV,	line 34 t	oecause it had	d one or m	ore related
(a) Name, address, and EIN of related organization	Z c	Prim	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership	Section Section 512(b)(13) controlled entity?
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632162 09-06-16										Sched	ule R (For	Schedule R (Form 990) 2016

Page 3.

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Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Schedule R (Form 990) 2016 Yes × × 4 은 19 ₽ ဝ ŧ 4 무 트 두 1 ₽ (d) Method of determining amount involved ¥ ÷ ¥ 18 = ÷ Ξ 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. 300,000.Fair Value During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Amount involved Transaction type (a-s) 1 Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) Z n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity k Lease of facilities, equipment, or other assets from related organization(s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule Lease of facilities, equipment, or other assets to related organization(s) Other transfer of cash or property from related organization(s) Gift, grant, or capital contribution from related organization(s) Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses **b** Gift, grant, or capital contribution to related organization(s) r Other transfer of cash or property to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a)
Name of related organization Loans or loan guarantees by related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Sale of assets to related organization(s) Dividends from related organization(s) (1) Jeffersonian Project 632163 09-06-16 ٥ 3 <u>ම</u> ପ୍ର **3** 9

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Schedule R (Form 990) 2016 American Legislative Exchange Council

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

illar was not a related organization. See instructions regarding excussion for certain investment parties imps	structions regarding excid	Sion for certain line	semient parmersmps						
(a)	(Q)	(0)	(e) Vieally Vieally			Ξ	Ξ	9	3
Name, address, and EIN of entity	Primary activity	흥률	Predominant income partners sec (related, unrelated, 501(c)(3)	Share of total	Share of end-of-year	Dispropor- tonate allocations?	Dispropor- Donate amount in box 20 managing ownership allocations? of Schedille K-1 partner?	General or managing partner?	Percentage ownership
		country)	sections 512-514) Yes No	ıncome	assets	Yes No	(Form 1065)	Yes	/
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Part VII	Supplementa	American I Information.				<u> </u>	
	Provide additiona	il information for responses	to questions on Schedu	ule R See instructi	ons.		
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